

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	Sin	15 928	4264 06/01/01
RESPONSE FORMALITY REVIEW	MD	947 947-T2	08/08/01 10/02/01
R&S		947	

BEST AVAILABLE COPY

INDEX OF CLAIMS

- ✓ Rejected N Non-elected
- = Allowed I Interference
- (Through numeral).... Canceled A Appeal
- ÷ Restricted O Objected

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here612
10-02-01

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